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05/04/2006

BLAKELY SOKOLOFF TAYLOR & ZAFMAN
 12400 WILSHIRE BOULEVARD
 SEVENTH FLOOR
 LOS ANGELES, CA 90025-1030

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Linda D'Elia

(Depositor's name)

(Signature)

6-20-06

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/508,821	03/29/2005	Masato Tanaka	96790P468	8030

TITLE OF INVENTION: FEEDBACK CONTROL METHOD AND FEEDBACK CONTROL DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	08/04/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
BARNES, CRYSTAL J	2121	700-028000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

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- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. 06/26/2006 DENMANU2 00000046 10508821

(A) NAME OF ASSIGNEE

YAMATAKE CORPORATION

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

TOKYO, JAPAN

01 FC:1501

1400.00 OP

02 FC:1504

300.00 OP

03 FC:8001

30.00 OP

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
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- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-2666 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date

Typed or printed name

Eric S. Hyman

Registration No. 30,139

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